the study in a sample of 773 children, high cholresterol was observed in 5.8% children in the age group of 13-18 years of five public schools of South Delhi. The percentage of over weight children was about 15% and the percentage of the under weight children was 30.5% in the same group. The studies require detailed analysis before coming to a conclusion.

(d) Providing medicine for needy including children is the responsibility of the State Government. However, Central Government supplements the efforts of the State Governments by providing medicine/grants etc. through various schemes and programmes devised for the purpose. Hypertension is a condition associated with life-style factors and obesity among children. Obesity is generally caused by excessive food intake, improper eating habits and lack of physical activity. Education of children to be physically active and follow balanced diets are important steps towards prevention and management of this disorder.

Amendment of Transplantation of Human Organs Act

2749. SHRIJANARDHANA POOJARY: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether in the backdrop of the recent case of death of an organ donor, there is a demand for amendment and redefining of the Transplanation of Human Organs Act, 1994; and

(b) if so, the detail in this regard and Government's reacton thereto?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRIMATI SUSHMA SWARAJ): (a) and (b) The Government has received certain suggestions to improve the legal framework in respect of organ transplantation. The Government is committed to effectively implementation of the various provisions of the Transplantation of Human Organs Act, 1994 and addresses impediments in the way of effective implementation of the said Act.

Fee hike in medical colleges

†2750. SHRIMATI KUM KUM RAI: Will the Minister of HEALTH AMD FAMILY WELFARE be pleased to state:

(a) whether it is a fact that the fees have been raised by the private medical colleges;

(b) if so, the details thereof and the reasons therefor; and

† Original notice of the question was received in Hindi.

(c) the number of private medical colleges in Bihar and the status thereof?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRIMATI SUSHMA SWARAJ): (a) and (b) The upper limit of fee chargeable from the students in the Private Unaided Medical Colleges admitted against the 'tree" and "payment" category of seats was being determined by the Central Government as per the schme evolved by the Hon'ble Supreme Court of India in the Unnikrishnan's case. The scheme evolved in the Unnikrisnan's case with regard to admission of students and fixation fees has since been overruled by a Constitution Bench of eleven judges of the Hon'ble Supreme Court, in its judgement delivered on 31 st October, 2002 in theT.M.A. Pai Foundation & Ors. *Vs.* State of Karnataka & Ors., wherein *inter-alia,* it has been held that the unaided private institutions shall have the freedom to fix its own free structure. It may generate a reasonable surplus which must be used for the betterment and growth of the educational institution. However, it should adopted a rational fee structure and would not be entitled to charge capitation fee or indulge in profiteeing.

In the light of the judgement dated 31-10-2002 in order to prevent over-charging or profiteering by the private unaided medical/dental colleges, the Central Government issued broad policy guidelines on 14-5-2003 to the State Governments and the Universities and some of the State Governments also framed regulations in this regard. On the other hand, some of the private unaided institutions claimed complete autonomy as regards determination of their own fee structure and that so long as there was no profiteering or charging of capitation fee by them there could be no interferece by the Government. The validity of the guidelines dated 14-5-2003 issued by the Central Government and also the regulations framed by some of the State Governments was chalenged by various private medical colleges.

All such petitions were together heard by a Five Judge constitution Bench of the Hon'ble Supreme Court of India which has delivered its judgenittiM on 14-8-2003. In this judgement the Hon'ble Court has laid down the g aneral principles for determining the reasonableness of the fee proposed by each institution so as to prevent over-charging or charging of capitation by them. A certified copy of the judgement is awaited.

(c) There are two private medical colleges in Bihar and both are recognised for award of MBBS degree.

Dsaths due to viral fever, encephalitis and malaria

†2751. SHRIMATI KUM KUM RAI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state :

(a) wether it is a fact that a large number of people have died in several States due to the viral fever, encephalitis and malaria;

(b) if so, the details thereof; and

(c) the steps being taken for eradication of these diseases?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRIMATI SUSHMA SWARAJ): (a) and (b) The number of deaths due to viral encephalitis and malaria, State-wise, during 2003 (upto 11-8-2003), as per reports received from the State Health Authorities, is given in the statement enclosed. (See below)

(c) Eradication of malaria and viral encephalitis, which are vector-borne diseases, is not technically feasible.

Strategies adopted for control of Malaria include:—

* Early case detection and prompt treatment.
* Selective vector control.
* Promotion of personal protection methods.
* Early detection and containment of epidemics.
* Information, Education and Communication towards personal protection and community participation.

  Institutional and Management Capacity Building, Trained Manpower Development and efficient Management Information System (MIS).

Strategies being adopted to control viral encephalitis include:—

1. Vector control by insecticidal spraying with approprate insecticide for outbreak containment.
2. Early diagnosis and proper management to reduce fatality.

† Original notice of the question was received in Hindi.